

Syringe Decriminalization, Senate Bill 11, and A Day of Advocacy



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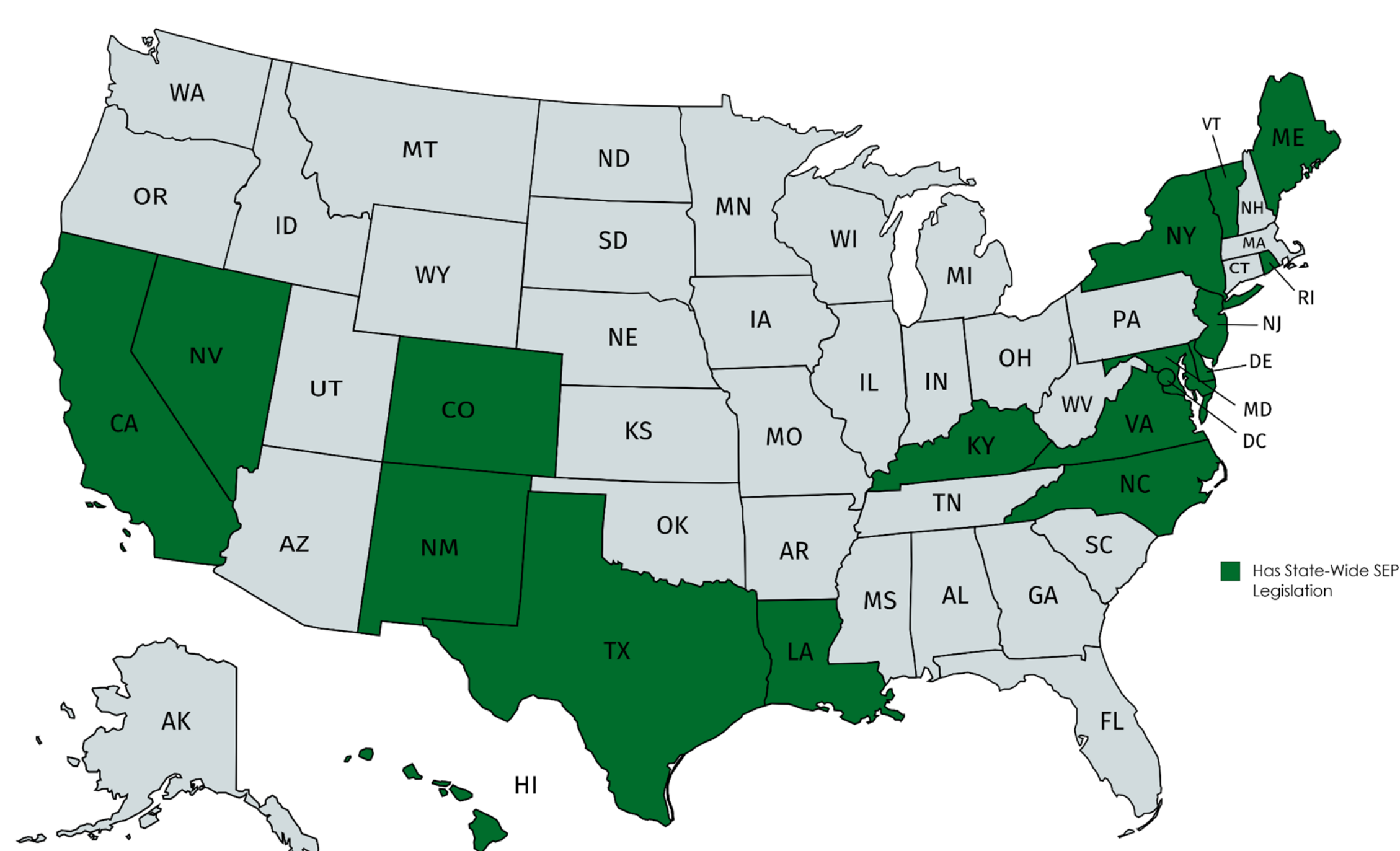
Methods

On January 3, 2019, Sen. Mike Bohacek and Sen. James Merritt introduced Senate Bill 11, which acted to amend current Syringe Exchange Program (SEP) legislation. Specifically, SB 11 proposed to “establish and maintain a syringe exchange program registry” that would track SEP participants statewide. The bill required a “qualified entity” to create a database that contains SEP participant names, dates of birth, last four of SSNs, and other identifying information to be determined, but did not name that entity and left many other questions unanswered.

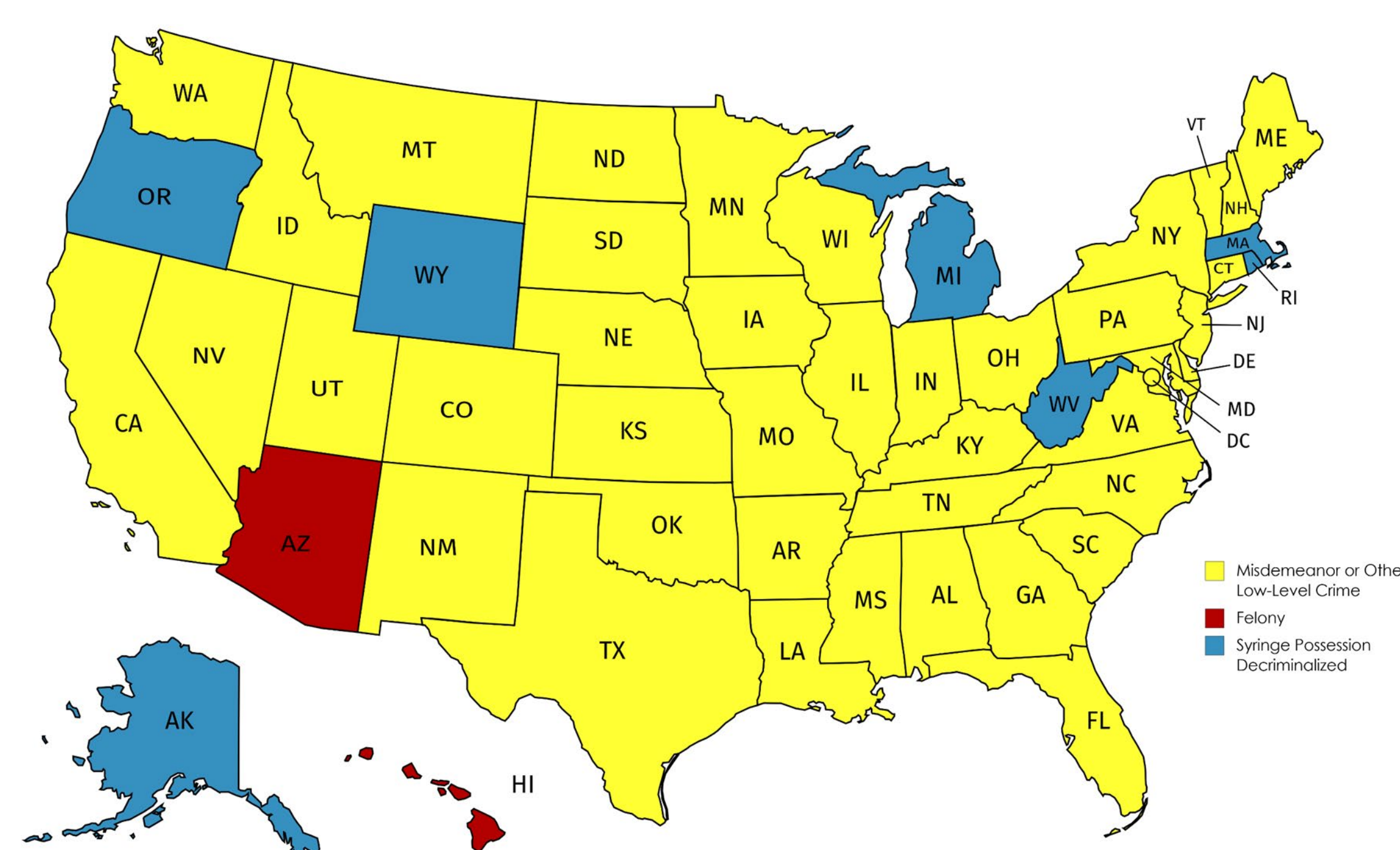
- Conducting multiple literature searches, all of which needed to be within the last five to eight years, in English, and the studies must have been conducted in the United States or Canada.
- Creating a policy matrix using legislation from other states on the decriminalization of syringe possession.
- Designing a policy brief that was used to inform a larger audience, including legislators, during an outreach day at the Indiana Statehouse, "Changing the Narrative: From a 'War on Drugs' to Public Health."
- Preparing questions for a panel discussion with subject matter experts, volunteering their time to help during the advocacy day, and encouraging one-on-one engagements with legislators.



U.S. States with SEPs



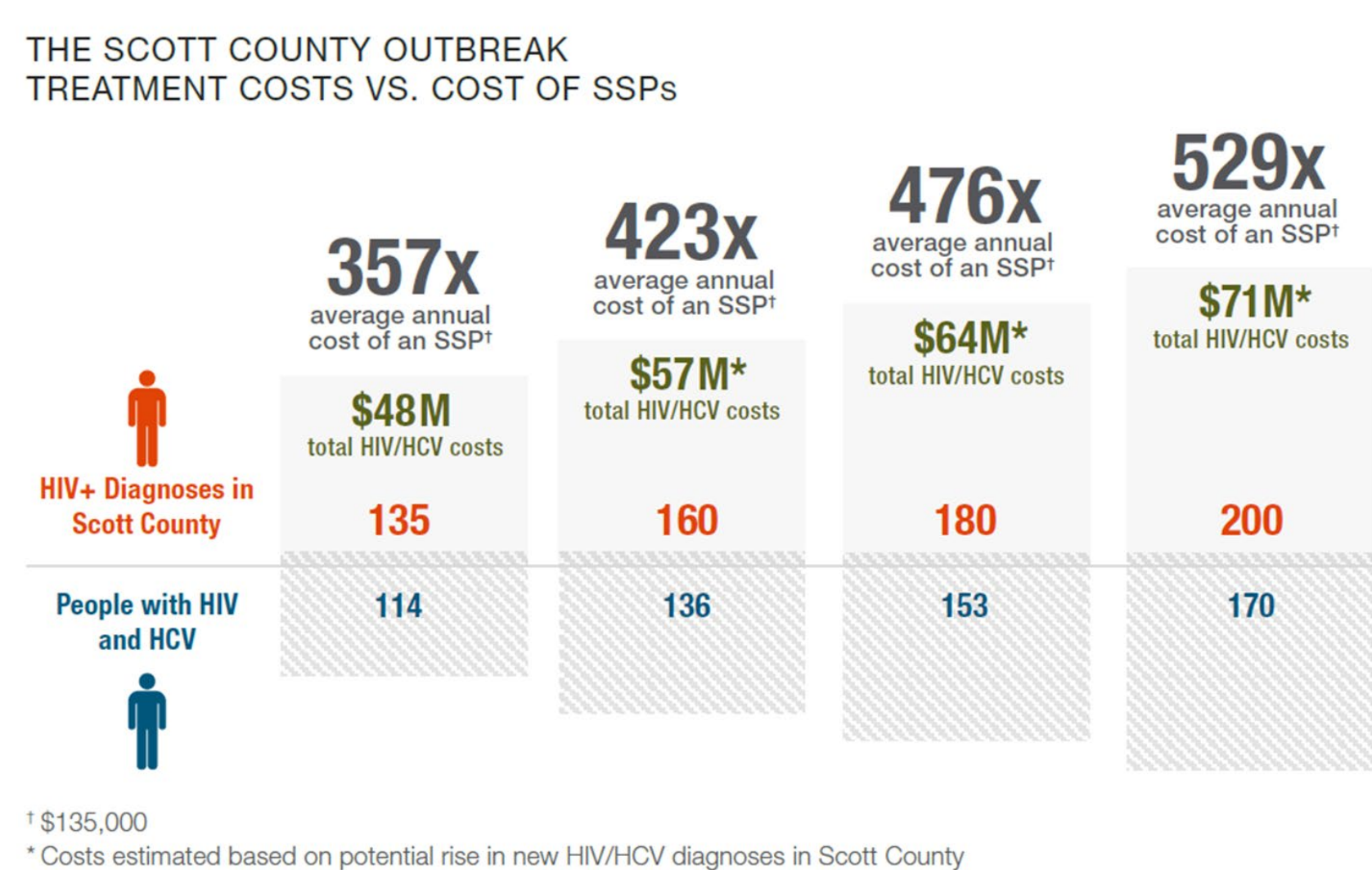
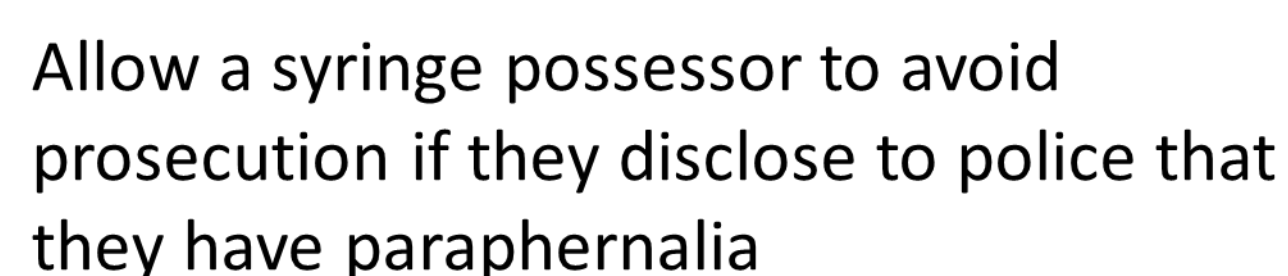
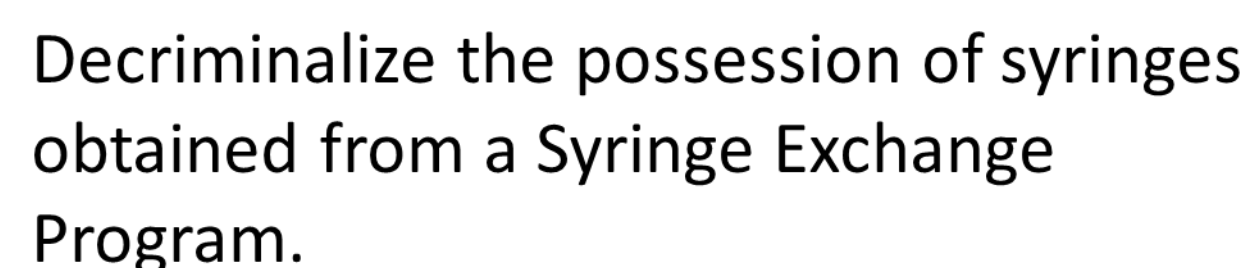
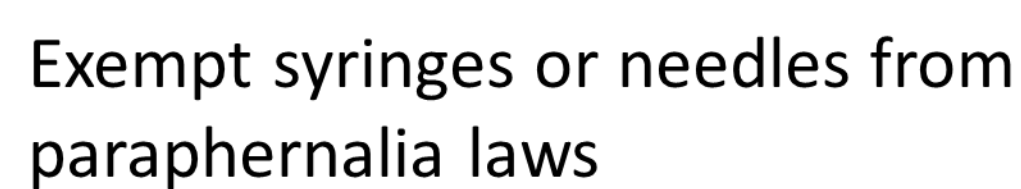
U.S. Syringe Legislation



The purpose of SB 11 was to protect SEP participants from undue legal issues, should they be pulled over or searched outside of a county with SEP legislation. However, the proposed amendment did not refute the current Level 6 felony charge associated with possession of hypodermic needles or syringes – specifically those containing more than a residual amount of a controlled substance.

Next Steps

Authorize Syringe Exchange Programs



Source: <https://www.amfar.org/ssp-infographic-05715/>

Overdose Lifeline, Inc.

| Inputs | Activities |
|--|---|
| <ul style="list-style-type: none"> • Locations to meet for outreach and advisory board • Volunteers • Partner researchers • Policy advocates • Grant/foundation funding • SSP best practices and applicable state policies • Participating SSPs | <ul style="list-style-type: none"> • Identify lead/co-lead agencies to lead an advisory board. • Garner support from stakeholders with lived experience, local nonprofit, and government agencies to sit on advisory board. • Hire independent evaluator to gauge impact of pilot study. • Develop research questions to include in locale SSP intake assessment forms. • Schedule dates/times to meet with SSPs regarding the pilot study |
| Outputs | |
| <ul style="list-style-type: none"> • Collaborative group creates and presents a final report with the results of the pilot study to a legal team at the Indiana Statehouse. • Legal teams at the Indiana Statehouse will use the report to draft language to be submitted as a bill during the 2020 session. • Increased community and stakeholder involvement in policy work. | |
| Outcomes | |
| <p>Short-Term:</p> <ul style="list-style-type: none"> • Reduction in individuals who participate in SSPs arrested for syringe possession. • Increased community awareness on SSPs and available services. <p>Long-Term:</p> <ul style="list-style-type: none"> • Reduction in hepatitis C, hepatitis B, and HIV/AIDS. • Reduction in heroin overdose and blood borne disease deaths. • Increase in the number of users seeking treatment. • Policy is changed to help individuals experiencing substance use disorders, rather than criminalize their disease. | |

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